


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PTO/SB/01 (12-97)

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration Submitted with Initial Filing **OR** ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	8505 (OL)
First Named Inventor	James K. Prueitt
COMPLETE IF KNOWN	
Application Number	/
Filing Date	May 30, 2001
Group Art Unit	TBD
Examiner Name	TBD

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**METHOD AND SYSTEM FOR GENERATING A PERMANENT RECORD OF
A SERVICE PROVIDED TO A MOBILE DEVICE**

(the specification of which is attached hereto) (Title of the invention)

☒ OR ☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 35(b) of any foreign application(s) for patent or inventor's certificate, or 35(c) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
None	None		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
None	None	

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
None		

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number OR ☒ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
Orlando Lopez	46,880		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number OR ☒ Correspondence address below

Name	Orlando Lopez				
Address	Polaroid Corporation				
Address	784 Memorial Drive				
City	Cambridge	State	MA	ZIP	02139
Country	U.S.	Telephone	781-386-6063	Fax	781-386-6435

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
James K.		Pruett	
Inventor's Signature		Date	
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		Country	US
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Post Office Address	Same		
City	Dedham	State	MA
		ZIP	02026
		Country	US

☒ Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 1 of 1

Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))						Family Name or Surname					
Richard A.						Pineau					
Inventor's Signature								Date			
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								Citizenship		U.S.	
Post Office Address											
395 Chestnut Street											
Post Office Address											
Same											
City		No. Andover		State		MA		ZIP		01845	
								Country		U.S.	
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))						Family Name or Surname					
Kevin F.						Bernier					
Inventor's Signature								Date			
Residence: City		Brookline		State		MA		Country		U.S.	
								Citizenship		U.S.	
Post Office Address											
53 Gardner Road											
Post Office Address											
Same											
City		Brookline		State		MA		ZIP		U.S.	
								Country		U.S.	
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))						Family Name or Surname					
Todd M.						Lynnton					
Inventor's Signature								Date			
Residence: City		Cambridge		State		MA		Country		U.S.	
								Citizenship		Australia	
Post Office Address											
1008 Massachusetts Avenue, Apt. 411											
Post Office Address											
Same											
City		Cambridge		State		MA		ZIP		U.S.	
								Country		U.S.	

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Page 2 of 1

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Scott D.				Wicker			
Inventor's Signature						Date	
Residence: City	Andover	State	MA	Country	U.S.	Citizenship	U.S.
Post Office Address	Same						
Post Office Address	11 Rennie Drive						
City	Andover	State	MA	ZIP	U.S.	Country	U.S.
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
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